ACIP Provisional Recommendations for HPV Vaccine
Date of ACIP vote: October 21, 2009
Date of posting of provisional recommendations: December 1, 2009

On October 21, 2009, ACIP voted on updated recommendations for use of human papillomavirus (HPV) vaccine, including recommendations for the bivalent HPV (types 16 and 18) vaccine (Cervarix) for females and the quadrivalent HPV (types 6,11,16 and 18) vaccine (Gardasil) for females and males.

These recommendations, when published in the MMWR, will replace recommendations published in the 2007 MMWR Recommendations and Reports document: Centers for Disease Control and Prevention. Quadrivalent Human Papillomavirus Vaccine: Recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR 2007; 56(No. RR-02).

Provisional Recommendations for Females

ACIP recommends routine vaccination of females aged 11 or 12 years with 3 doses of HPV vaccine. The vaccination series can be started beginning at age 9 years.

HPV vaccination also is recommended for females aged 13 through 26 years who have not been previously vaccinated or who have not completed the full vaccination series. Ideally, vaccine should be administered before potential exposure to HPV through sexual contact.

> ACIP recommends vaccination with either the bivalent HPV vaccine or the quadrivalent vaccine for prevention of cervical cancers and precancers.
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> ACIP recommends vaccination with the quadrivalent HPV vaccine for prevention of cervical cancers and precancers, and genital warts.*

Provisional Recommendations for Males

The 3-dose series of quadrivalent HPV vaccine may be given to males aged 9 through 26 years to reduce their likelihood of acquiring genital warts. Ideally, vaccine should be administered before potential exposure to HPV through sexual contact.

Provisional Recommendations for Administration, Precautions and Contraindications

- The quadrivalent HPV vaccine and bivalent HPV vaccine are each administered in a 3-dose schedule, with the second dose administered 1 to 2 months after the first dose and the third dose 6 months after the first dose.
- The minimum interval between the first and second doses of vaccine is 4 weeks. The minimum interval between the second and third dose of vaccine is 12 weeks. The minimum interval between the first and third dose is 24 weeks.
- If the HPV vaccine schedule is interrupted, the vaccine series does not need to be restarted.
- HPV vaccines are not live vaccines and can be administered either simultaneously or at any time before or after an inactivated or live vaccine.
- Whenever possible, the same HPV vaccine product should be used for all doses in the series.

- HPV vaccines are not recommended for use in pregnant women. However, pregnancy testing is not needed before vaccination. Any exposure to vaccine during pregnancy should be reported to the appropriate vaccine pregnancy registry:
    - 1-800-986-8999 (Merck and Co., Inc. for quadrivalent HPV vaccine)
    - 1-888-452-9622 (GlaxoSmithKline for bivalent HPV vaccine)

- HPV vaccines are contraindicated for persons with a history of immediate hypersensitivity to any vaccine component. Quadrivalent HPV vaccine is contraindicated for persons with a history of immediate hypersensitivity to yeast. Bivalent HPV vaccine in prefilled syringes is contraindicated for persons with anaphylactic latex allergy.

- Syncope can occur after vaccination, most commonly among adolescents and young adults. To avoid serious injury related to a syncopal episode, vaccine providers should consider observing patients for 15 minutes after they are vaccinated.

* The quadrivalent vaccine has also been demonstrated to protect against vulvar and vaginal cancers and precancers.

This document can be found on the CDC website at:
http://www.cdc.gov/vaccines/recs/provisional/downloads/hpv-vac-dec2009-508.pdf